SCC eFile	2014 ANNUAL REPORT 214508698 COMMONWEALTH OF VIRGINIA FATE CORPORATION COMMISSION					
1.) CORPORATION NAME:			DUE DATE: 2/	/28/2014		
THE HIGH PLAINS INDIANS, II 2.) VA REGISTERED AGENT NAM DANTE DESIDERIO			SCC ID NO: F1540006			
4218 VIRGILINA RD VIRGILINA, VA		_	5.) STOCK INI CLASS	FORMATION AUTHORIZED		
3.) CITY OR COUNTY OF VA REG HALIFAX COUNTY	ISTERED OFFICE:					
4.) STATE OR COUNTRY OF INCO	DRPORATION:					
6.) PRINCIPAL OFFICE ADDRESS	:					
ADDRESS: 227 KEI	RR DRIVE					
CITY/ST/ZIP: ROXBORO, NC 27573						
7.) DIRECTORS AND PRINCIPAL (officers must be n a director and	listed. An individual an officer.		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANTE DESIDERIO PRESIDENT 2728 HICKORY ST ALEXANDRIA, VA 22305	X OFFICE	R	DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLENE Y. MARTIN TREASURER 6907 OAK BEND TRAIL GREENSBORO, NC 27410	X OFFICE	R	DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JULIA M. PHIPPS SECRETARY 1186 MARIETTA DRIVE KERNERSVILLE, NC 27284	X OFFICE	R	DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DOROTHY STEWART CROWE CHAIRMAN 156 CHEROKEE LANE ROXBORO, NC 27574	OFFICE	R	x DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHIRLEY M HAZEL DIRECTOR 3606 BURLINGTON ROAD ROXBORO, NC 27574	OFFICE	R	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TONDA C HUDDLESTON DIRECTOR 208 FAIRVIEW AVENUE HOPEWELL, VA 23860	OFFICE	R	X DIRECTOR		

HOPEWELL, VA 23860

		OFFICE	R	χ DIRECTOR		
NAME:	OTIS K. MARTIN		L			
TITLE:	DIRECTOR					
ADDRESS:	227 KERR DR					
CITY/ST/ZIP/CO:	ROXBORO, NC 27573					
		OFFICE	R	χ DIRECTOR		
NAME:	DELLA FAY MARTIN		L			
TITLE:	DIRECTOR					
ADDRESS:	515 HIGH PLAINS ROAD					
CITY/ST/ZIP/CO:	ROXBORO, NC 27574					
		OFFICE	R [χ DIRECTOR		
NAME:	WILLIAM T PAUL		L			
TITLE:	DIRECTOR					
ADDRESS:	350 WRENN-CRUMPTON					
CITY/ST/ZIP/CO:	ROXBORO, NC 27574					
		OFFICE	:R [χ DIRECTOR		
NAME:	CURTIS SHEPHERD		L			
TITLE:	DIRECTOR					
ADDRESS:	30 CRYSTAL RIDGE DRIVE					
CITY/ST/ZIP/CO:	TIMBERLAKE, NC 27583					
		OFFICE	:R	χ DIRECTOR		
NAME:	KARA STEWART		L			
TITLE:	DIRECTOR					
ADDRESS:	2705 ARDSLEY DRIVE					
CITY/ST/ZIP/CO:	DURHAM, NC 27704					
		OFFICE	R [χ DIRECTOR		
NAME:	JENNIFER TALLEY-ASH		L			
TITLE:	DIRECTOR					
ADDRESS:	15615 PROVIDENCE ROAD					
CITY/ST/ZIP/CO:	SOUTH PRINCE GEORGE, VA	23805				
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.						
/s/ CHARLENE Y. MARTIN	CHARLENE Y. MARTIN.		2/1	7/2014		
SIGNATURE OF DIRECTOR/OFFICER	,	_		DATE		
LISTED IN THIS REPORT	PRINTED NAME AND CORI	PORATE	_			
	TITLE					
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material						
respect with the intent that the document be delivered to the Commission for filing.						